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7590 11/22/2004

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02/16/2005 SSITHIB2 00000154 500309 09706475

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| | |
|--------------------------|--------------------|
| Jennifer L. Hobbs | (Depositor's name) |
| <i>Jennifer L. Hobbs</i> | (Signature) |
| February 11, 2005 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|-----------------------|---------------------|------------------|
| 09/706,475 | 11/03/2000 | Alexei N. Pilipetskii | 1006 | 6892 |

TITLE OF INVENTION: METHOD AND APPARATUS FOR OPTIMIZING THE DISPERSION AND DISPERSION SLOPE FOR A DISPERSION MAP WITH SLOPE-COMPENSATING OPTICAL FIBERS

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|------------------|-----------------|------------------|------------|
| nonprovisional | NO | \$1370 \$1400 | \$0 | \$1370 \$1400 | 02/22/2005 |
| EXAMINER | ART UNIT | | CLASS-SUBCLASS | | |
| LI, SHI K | 2633 | | 398-081000 | | |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 1 _____
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Tyco Telecommunications (US) Inc.

Morristown, NJ

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0309 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date February 11, 2005

Typed or printed name

Registration No. 40,126

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